

Attachment 1 - Civil Complaint

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF TEXAS
DIVISION

FILED
2024 APR -5 PM 4:20
CLERK OF DISTRICT COURT
WESTERN DISTRICT OF TEXAS
BY AK

Robert E. McCook

(Enter your full name)

Plaintiff(s)

CASE NUMBER:

1:24CV00365 DII

(Supplied by Clerk's Office)

Department of the Army
Army Review Board Agency
351 18th STREET SOUTH SUITE 205
ARLINGTON, VA 22202-3531

(Enter full name of each Defendant)

Defendant(s)

COMPLAINT

First Paragraph (Name and Address of Plaintiff)

Second Paragraph (Name and Address(es) of Defendant(s))

Third Paragraph (Jurisdiction Plea)

Fourth Paragraph (Allegation 1)

Fifth Paragraph (Allegation 2) ...

The final paragraph should contain a statement of the relief you are seeking. This paragraph should not be numbered.

Signature

Name (Typed or Printed)

Address

Telephone Number

RM
Robert E. McCook
301 CHISHOLM TRL
BARBER, TX 78602
512-549-3824

Attachment 2 - EEOC Complaint Form

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF TEXAS
DIVISION

R. McCook
Robert E McCook
301 CHESHAM TRL
BASTROP, TX 78602 (512) 519-3824
(Name of plaintiff or plaintiffs)

Civil Action Number:

v. DEPARTMENT OF THE ARMY
ARMY REVIEW BOARD AGENCY

(Supplied
by Clerk's Office)

251 18th STREET SOUTH SUITE 385
ARLINGTON, VA 22202-3531
PH (703) 545-6900 Phone
Email: ARB@ingway@mail.mil
(Name of defendant or defendants)

COMPLAINT

1. This action is brought by Robert E McCook, Plaintiff,
pursuant to the following selected jurisdiction:

(Please select the applicable jurisdiction)

- ☐ Title VII of the Civil Rights Act of 1964 (42 USC §§ 2000e et seq.) Employment Discrimination on the basis of race, color, sex (gender, pregnancy and sexual harassment), religion or national origin.
- ☐ The Age Discrimination in Employment Act (29 USC §§ 621 et seq.) (ADEA).
- ☐ The Americans With Disabilities Act (42 USC §§ 12102 et seq.) (ADA).
- ☐ The Equal Pay Act (29 USC § 206(d)) (EPA).
- ☐ The Rehabilitation Act of 1973 (29 USC § 791 et seq.) (Applicable to federal employees only).

2. Defendant DEPARTMENT OF THE ARMY
ARMY REVIEW BOARD AGENCY (Defendant's name) lives
at, or its business is located at 251 18th STREET SOUTH, SUITE 385
(street address), _____ (city), ARLINGTON
VA (state), 22202-3531 (zip).

3a. Plaintiff sought employment from the defendant or was employed by the defendant at 512TH MAJOR CO, Mannheim, Germany (street address), (city), Mannheim (state), Germany (zip).

3b. At all relevant times of claim of discrimination, Defendant employed DEPARTMENT OF THE ARMY, Army Acquisition Agency, 251 18th STREET SOUTH, Suite 385, Arlington, VA 22202-3531 (#) employees. If defendant is a union, at all relevant times of claim of discrimination, Defendant had _____ (#) members.

4. Defendant discriminated against plaintiff in the manner indicated in paragraph 8 of this complaint on or about _____ (month) _____ (day) _____ (year). If incidents of discrimination occurred more than one day, please indicate the beginning and ending dates of such acts: _____

5. Plaintiff filed charges against the defendant with the Equal Employment Opportunity Commission (E.E.O.C.) charging defendant with the acts of discrimination indicated in paragraph 7 of this complaint on or about _____ (month) _____ (day) _____ (year). (Not applicable to federal civil service employees).

6a. The E.E.O.C. issued a **Notice of Right to Sue** which was received by plaintiff on (month) May 26th (day) 2023 (year). (Not applicable to ADEA and EPA claims or federal civil service employees).

VERY IMPORTANT NOTE:

PLEASE ATTACH A COPY OF YOUR NOTICE OF RIGHT TO SUE AND THE ENVELOPE IN WHICH IT WAS RECEIVED TO THIS COMPLAINT.

6b. Please indicate below if the E.E.O.C issued a **Determination** in your case:

☐ Yes
☐ No

VERY IMPORTANT NOTE:

IF YOU CHECKED "YES", PLEASE ATTACH A COPY OF THE E.E.O.C.'S DETERMINATION TO THIS COMPLAINT

7. Because of plaintiff's:

(Please select the applicable allegation(s))

☐ Race (If applicable, state race) _____
☐ Color (If applicable, state color) _____

- ☐ Sex (gender, pregnancy or sexual harassment) (If applicable, state sex and claim)
- ☐ Religion (If applicable, state religion) _____
- ☐ National Origin (If applicable, state national origin) _____
- ☐ Age (If applicable, state date of birth) _____
- ☐ Disability (If applicable, state disability) _____
- ☐ Prior complaint of discrimination or opposition to acts of discrimination.
(Retaliation) (If applicable, explain events of retaliation) _____

The defendant: **(please select all that apply)**

- ☐ failed to employ plaintiff.
- ☐ terminated plaintiff's employment.
- ☐ failed to promote plaintiff.
- ☐ harassed plaintiff.
- ☐ other (specify) _____

8a. State **specifically** the circumstances under which defendant, its agent, or employees discriminated against plaintiff **PERSONALLY**:

VERY IMPORTANT NOTE: **INCLUDE SPECIFIC DATES, SPECIFIC EVENTS,
AND ANY SPECIFIC COMMENTS MADE BY
DEFENDANT PERTAINING TO THE
DISCRIMINATION CLAIM ALLEGED ABOVE.**

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8b. List any **witnesses** who would testify for plaintiff to support plaintiff's allegations and the substance of their testimony:

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8c. List any **documentation** that would support plaintiff's allegations and explain what the documents will prove:

9. The above acts or omissions set forth in paragraphs 7 and 8 are:

- ☐ still being committed by defendant.
☐ no longer being committed by defendant.

10. Plaintiff should attach to this complaint a copy of the charge filed with the Equal Employment Opportunity Commission. This charge is submitted as a brief statement of the facts supporting this complaint.

WHEREFORE, plaintiff prays that the Court grant the following relief to the plaintiff:

- ☐ Defendant be directed to employ plaintiff.
☐ Defendant be directed to re-employ plaintiff.
☐ Defendant be directed to promote plaintiff.
☐ Defendant be directed to _____
and that the Court grant such other relief as may be appropriate, including injunctive orders, damages, costs and attorney's fees.

I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Date

April 5, 2024 16:16 pm

Signature of Plaintiff

Address of Plaintiff

301 CHASEHOLM TRL

City

State

Zip Code

Telephone Number(s)

Ashop, TN 37602
hm
(512) 549-3824
hm 549-3824

April 5, 2024

(Statement of Support)

ATT To: United States District Court
Western District of Texas.

Plaintiff I, Robert McCool suffered PTSD
from IED in Iraq war; was
seeing mental Health Doctor
in Army. from war.

After getting medical Discharged Sept 16, 2004
from military.

Admitted To Hospital mental Health
PTSD Treatment Center
Waco VA Hospital.

① All my conditions are
military Related since
Being in military service
Also diagnosed with
Asthma April 2002 in
military service; still
Present To this day.

② Go to the very first
Award Disabilities from
Houston Regional VA Office.

③ Joined military 1988-Sept 16, 2004
medical Discharge.

2) Correctional Office

I went in 2007 for 2 1/2
months for PTSD Treatment;
you have to stay there. I stayed
on the 2nd floor with other
combat war Veterans & Vietnam
Veterans.

Robert E McCool
301 CHESTNUT TRL
Bastrop, Tx 78602

signature: M